

1. **Card**
Date of Issue

1-10-21

2. **Card**
Valid upto

permanently

3. **Card**
Name

L.G. Srivastava

4. **Card**
Guardian Name

Guardian Name

5. **Card**
Date of Birth & Age

7	4	2001
Gender		
☒ Male	☐ Female	

6. **Card**
Sex

7. **Card**
Community

SC/ST/BC/MBC and DC/Others

8. **Card**
Address (with Telephone No)

Address (with Telephone No)

34/1, K. V. Nagar, Sec-13, Delhi-110025

Dr. K. V. Nagar, Sec-13, Delhi-110025

Ph: 994 365 8652

Ph: 994 365 8652

9. **Card**
Blood Group

10. **Card**
Occupation - Government / Private / Self employment

11. **Card**
Registration in Employment

12. **Card**
Family Income (PA)

13. **Card**
Occupation - Government / Private / Self employment

14. **Card**
Registration in Employment

15. **Card**
Registration in Employment

Yes	No
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